Report Date: 29 Apr 2012

Summary Report for Individual Task 805D-203-6102 Perform Suicide Risk Assessment Status: Approved

DISTRIBUTION RESTRICTION: Approved for public release; distribution is unlimited.

DESTRUCTION NOTICE: None

Condition: The digital battalion battle staff is conducting combat or preparing to conduct combat operations or is operating in a normal peacetime environment at a normal state of readiness. A Soldier or family member in your area of responsibility seeks individual pastoral counseling. The unit ministry team has access to facilities, and appropriate resources. Some iterations of this task should be performed in MOPP.

**Standard:** Assessed suicidal intention of a Soldier or Family member and took appropriate action.

Special Condition: None

Special Standards: None

Special Equipment: None

**MOPP:** Sometimes

**Task Statements** 

Cue: None

# **DANGER**

None

### **WARNING**

None

# **CAUTION**

None

Remarks: None

Notes: SAFETY CONSIDERATIONS: Critical to saving distressed persons

NO. ELO TITLE

- 1. Define suicide.
- 2. Identify the three major danger signs of suicidal behavior.
- 3. Perform a suicide risk assessment.
- 4. Identify a suicidal person.

5. Refer suicidal persons to the appropriate agency and follow up.
METHOD OF INSTRUCTION:Conference/lecture; Video; Handouts; Scenarios; PEs

METHOD OF TESTING:CRITERION TEST: Given various scenarios, determine likelihood of suicidal risk in each. **REVIEW TEST:** 

#### **Performance Steps**

1. Identify indicators of suicidal potential.
a. Verbal.
(1) Direct, such as, "Im going to kill myself."
(2) Indirect, such as, "They'll be sorry when I'm gone."
b. Behavioral.
(1) Direct, such as suicide gesture or attempt
(a) Gestureany deliberate attempt as self-harm that is nonfatal.
(b) Attemptan act by which the client actually intends to die.
(2) Indirect.
(a) Writing a will.
(b) Giving away prized possessions.
(c) Talking about taking a long trip.
(d) Increase in alcohol use.
(e) Social withdrawal.
(f) Lack of concern for others; reaction to the suicidal ideation.
(g) Taking unusual risks.
(h) Increased antisocial behavior-stealing, child and spouse abuse, truancy from school or work, and tresponsible financial behavior.
c. Physical.
(1) Change of appetite, usually decreased.
(2) Weight loss.
(3) Insomnia or other sleep disturbance.
(4) Decrease in sexual interest or energy .
(5) Frequent complaints of headaches, lower back pain, or indigestion.
d. Psychological.
(1) Deterioration of personal hygiene and appearance.

(2) Agitated behavior or psychomotor retardation.
(3) Feelings of depression.
(a) helplessness and hopelessness.
(b) Pervasive sense of low self esteem or worthlessness.
(c) Loss of interest in usually pleasurable activities.
(d) Extreme anger and severe nervousness.  Note: Occasionally a sudden uplift in spirits indicates the decision to commit suicide. The uplift creates enough energy to carry out the act.
(4) Halluncinationshearing voices telling the client to kill himself or herself.
(5) Cognitive functioning.
(a) Disorientation or confusion.
(b) Impulsiveness.
(c) Suicidal ideation.
e. Recent stressors.
(1) rejection by a loved one.
(2) Death of a close friend, spouse, or family member.
(3) Terminal illness.
(4) Disfiguring surgery or accident.
(5) Financial loss.
(6) Significant career or employment changes
(7) Retirement.
f. Past history.
(1) Failure to maintain productive work.
(2) Inability to maintain meaningful interpersonal relations.
(3) Suicidal gestures as a means of coping.
(4) Suicide or suicidal attempts by a family member or close friend.  Note: Anniversaries of losses are high risk periods. Inquire into dates of family deaths, retirements, and other significant events.

- 2. If the client exhibits any clues that indicate an increased potential for suicide, ask the client directly about thoughts of hurting or killing himself or herself.3. If the client exhibits suicidal ideation, determine whether the client has suicide plan.
  - a. Inquire about \_\_\_
    (1) Time.
    (2) Place.
    (3) Method.
    Note: The more lethal the method, the greater the risk.
- b. Determine if the method is consistent with the available means. For example, if the client says he or she plans to use a gun, determine if the client has a gun.

Note: If the client exhibits suicidal behavior, suicidal ideation, or has suicide plan, do not leave the client unattended.

- 4. Inform the chain of command regarding client's disposition.
  - a. Refer to appropriate health care for further evaluation.
  - b. Client's return to duty with close supervision/observation.
- 5. Ensure the client is escorted tot he proper location once the appropriate disposition is made.
- 6. Follow up as situation requires.

(Asterisks indicates a leader performance step.)

#### **Evaluation Preparation:**

PERFORMANCE MEASURES	GO	NO-GO	N/A
1. Identified indicators of suicidal poetential.			
2. Confronted the issue of suicide directly.			
3. Determined whether the client has a suicide plan.			
4. Informed the chain of command regarding client's disposition.			
5. Ensured the client is properly escorted according to disposition			
6. Followed up as the situation required.			

### **Supporting Reference(s):**

Step Number	Reference ID	Reference Name	Required	Primary
	AR 165-1	Army Chaplain Corps Activities	Yes	No
	CD16-01	Chaplain Training Manager Course	Yes	No
	DA PAM 165-3	Chaplain Training Strategy	No	No
	FM 1-05	RELIGIOUS SUPPORT	Yes	No
	JOINT PUB 1-05	Religious Affairs in Joint Operations	Yes	No
	PAM 600-24	SUICIDE PREVENTION AND PSYCHOLOGICAL AUTOPSY	Yes	No
	PAM 600-70	US ARMY GUIDE TO THE PREVENTION OF SUICIDE AND SELF-DESTRUCTIVE BEHAVIOR	Yes	No

**Environment:** Environmental protection is a continual process. Always be alert to ways to protect our environment and reduce waste.

**Safety:** In a training environment, leaders must perform a risk assessment in accordance with FM 5-19, Composite Risk Management. Leaders will complete a DA Form 7566 COMPOSITE RISK MANAGEMENT WORKSHEET during the planning and completion of each task and sub-task by assessing mission, enemy, terrain and weather, troops and support available-time available and civil considerations, (METT-TC). Note: During MOPP training, leaders must ensure personnel are monitored for potential heat injury. Local policies and procedures must be followed during times of increased heat category in order to avoid heat related injury. Consider the MOPP work/rest cycles and water replacement guidelines IAW FM 3-11.4, NBC Protection, FM 3-11.5, CBRN Decontamination. Everyone is responsible for safety. A thorough risk assessment must be completed prior to every mission or operation.

Prerequisite Individual Tasks: None Supporting Individual Tasks: None Supported Individual Tasks: None

**Supported Collective Tasks:** 

Task Number	Title	Proponent	Status
16-5-2001	Perform Religious Crisis Response	16 - Chaplain (Collective)	Approved

#### ICTL Data:

ICTL Title	Personnel Type	MOS Data
AOC 56A, Chaplain	Officer	AOC: 56A
Chaplain, Lieutenant	Officer	AOC: 56A, Rank: 1LT, Duty Pos: VAH